

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

**FORM C/OH
COVER SHEET PG 2**

13 C/OH NAME Kitchen, Ann

14 ACCOUNT # (Ethics Commission filers)
00000001

15 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE <input checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME Sierra Club Political Committee of Texas COMMITTEE ADDRESS 615 Willow San Antonio, TX 78202 COMMITTEE CAMPAIGN TREASURER NAME Gonzalez, Hector COMMITTEE CAMPAIGN TREASURER ADDRESS 615 Willow San Antonio, TX 78202
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additional pages

16 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 21,640.00
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
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4. TOTAL POLITICAL EXPENDITURES	\$ 53,486.17
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CONTRIBUTION BALANCE

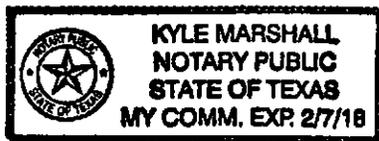
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 13,228.55
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OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 38,200.00
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17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



Ann Kitchen

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ann Kitchen, this the 27 day of October, 2014, to certify which, witness my hand and seal of office.

Kyle Marshall
Signature of officer administering oath

Kyle Marshall
Print name of officer administering oath

Store Manager
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 2/29 Report: 4/40

2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date: 10/20/2014
5 Full name of contributor out-of-state PAC (ID# _____)
Benold, Stephanie

7 Amount of contribution (\$) | **8** In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
6607 Brodie Ln
Apt 614
Austin, TX 78745-4651

\$25.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date: 10/24/2014
Full name of contributor out-of-state PAC (ID# _____)
Bercu, Steven

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
4108 Burnet Rd
Austin, TX 78756-3629

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Bookseller

Employer (See Instructions)
BookPeople

Date: 10/16/2014
Full name of contributor out-of-state PAC (ID# _____)
Bible, Lori

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
PO Box 648
Buda, TX 78610-0648

\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date: 10/25/2014
Full name of contributor out-of-state PAC (ID# _____)
Bird, Sarah

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
6102 Mountainclimb Dr
Austin, TX 78731-3824

\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date: 10/24/2014
Full name of contributor out-of-state PAC (ID# _____)
Bledsoe, Missy

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
1808 Forestglade Dr
Austin, TX 78745-1777

\$10.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/29 Report: 5/40	
2 FILER NAME Kitchen, Ann		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 10/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Boyd, Joseph 6 Contributor address; City; State; Zip Code 8901 Kurten Cemetery Rd Bryan, TX 77808-8087	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) VP		10 Employer (See Instructions) Lockwood, Andrews & Newnam, Inc.	
Date 10/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brady, Denise Contributor address; City; State; Zip Code 1310 San Antonio St Apt 2 Austin, TX 78701-1642	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brewer, Kathrin Contributor address; City; State; Zip Code 714 Wayside Dr Austin, TX 78703-4342	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Make A Wish	
Date 10/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bridges, Linda Contributor address; City; State; Zip Code 7802 Swindon Ln Austin, TX 78745-6826	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Texas AFT	
Date 10/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brim, Jay Contributor address; City; State; Zip Code 1309 Lost Creek Blvd Austin, TX 78746-6316	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/29 Report: 6/40	
2 FILER NAME Kitchen, Ann		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 10/17/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brown, Catherine 6 Contributor address; City; State; Zip Code 501 Lightsey Rd Austin, TX 78704-7023	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) retired		10 Employer (See Instructions) retired	
Date 10/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carmichael, Keith Contributor address; City; State; Zip Code 2202 Sunny Slope Dr Austin, TX 78703-1727	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) President of Austin Region		Employer (See Instructions) MHBT	
Date 10/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Castleberry, Christianne Contributor address; City; State; Zip Code 2405 Dip Cv Austin, TX 78704-4511	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chang Sheppard, Jade Contributor address; City; State; Zip Code 5001 Miss Julie Ln Austin, TX 78727-5806	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Gideon	
Date 10/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chernet, Tsegaye Contributor address; City; State; Zip Code PO Box 144542 Austin, TX 78714-4542	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Driver		Employer (See Instructions) Lone Star Cab	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 6/29 Report: 8/40	
2 FILER NAME Kitchen, Ann			3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 10/23/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cumberbatch, Ashton 6 Contributor address; City; State; Zip Code 3203 Funston St Austin, TX 78703-1333	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Administrator		10 Employer (See Instructions) Seton Healthcare Family		
Date 10/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Curry, Michael Contributor address; City; State; Zip Code 700 Lavaca St Ste 1400 Austin, TX 78701-3102	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) mediator		Employer (See Instructions) self -		
Date 10/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Danburg, Debra Contributor address; City; State; Zip Code 3000 Cedarview Dr Austin, TX 78704-4611	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) atty. / State Representative		Employer (See Instructions) retired		
Date 10/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Daniel, Harold Contributor address; City; State; Zip Code 3203 Cupid Dr Austin, TX 78735-6904	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Client Support Engineer		Employer (See Instructions) AcademicWorks		
Date 10/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DasGupta, Sumit Contributor address; City; State; Zip Code 8900 Bluegrass Dr Austin, TX 78759-7168	Amount of contribution (\$) \$75.00	In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Retired: Sr. VP of Engineering		Employer (See Instructions) Formerly with Silicon Integration Initiative, Inc.		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/29 Report: 10/40	
2 FILER NAME Kitchen, Ann		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 10/23/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Forrest, Hugh and Vivian 6 Contributor address; City; State; Zip Code 703B E 50th St B Austin, TX 78751-2615	7 Amount of contribution (\$) \$650.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Event Planner		10 Employer (See Instructions) SXSW (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Date 10/07/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fowler, Kristen and Travis Contributor address; City; State; Zip Code 100 McKennas Cv Buda, TX 78610-3242	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Remedy Therapy Staffing, PLLC (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Date 10/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fransden, Chris and Barbara Contributor address; City; State; Zip Code 4601 Pinehurst Dr S Austin, TX 78747-1419	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Friedland, Curtis Contributor address; City; State; Zip Code 3625 Manchaca Rd Austin, TX 78704-6631	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Friedland Briggs (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Date 10/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Friedman, Jeff Contributor address; City; State; Zip Code 3500 Jefferson St Ste 110 Austin, TX 78731-6220	Amount of contribution (\$) \$180.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Capra & Cavelli (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/29 Report: 11/40	
2 FILER NAME Kitchen, Ann		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 10/22/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Friedman, Jeff 6 Contributor address; City; State; Zip Code 3500 Jefferson St Ste 110 Austin, TX 78731-6220	7 Amount of contribution (\$) \$170.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Owner		10 Employer (See Instructions) Capra & Cavelli	
Date 10/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gantt, Melanie Contributor address; City; State; Zip Code 2404 Forest Bend Dr Austin, TX 78704-4526	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) stay-at-home mom		Employer (See Instructions) self	
Date 10/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gasper, Pete Contributor address; City; State; Zip Code 906 W 30th St Austin, TX 78705-2104	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gasquet, Hector and Lina Contributor address; City; State; Zip Code 3209 John Campbells Trl Austin, TX 78735-6917	Amount of contribution (\$) \$15.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gattuso, Cathy Contributor address; City; State; Zip Code 2200A Homedale Dr Austin, TX 78704-2759	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self Employed	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 10/29 Report: 12/40	
2 FILER NAME Kitchen, Ann			3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 10/20/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gattuso, Cathy 6 Contributor address; City; State; Zip Code 2200A Homedale Dr Austin, TX 78704-2759	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Psychotherapist			10 Employer (See Instructions) Self Employed	
Date 10/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gentle, James Contributor address; City; State; Zip Code 2006 Arthur Ln Austin, TX 78704-3236	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Attorney			Employer (See Instructions) University of Texas System	
Date 10/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Getahun, Firew and Hirut Contributor address; City; State; Zip Code 2722 High Point Dr Round Rock, TX 78664-5790	Amount of contribution (\$) \$450.00	In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Accountant			Employer (See Instructions) Financial Freedom	
Date 09/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gorges Tounget, Ann Contributor address; City; State; Zip Code 6800 Cypress Point Cv Austin, TX 78746-7118	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 10/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Grover, Rhonda Contributor address; City; State; Zip Code 2607 Pinewood Ter Austin, TX 78757-2136	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Paralegal			Employer (See Instructions) Arnold and Associates, PC	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 11/29 Report: 13/40	
2 FILER NAME Kitchen, Ann			3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 10/17/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hahn, Sally Jo 6 Contributor address; City; State; Zip Code 5208 Buffalo Pass Austin, TX 78745-2704	7 Amount of contribution (\$) \$20.00	8 In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)	
Date 10/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hale, Bryan Contributor address; City; State; Zip Code 1300 Windsor Rd Austin, TX 78703-4112	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Chemist			Employer (See Instructions) SACHEM, Inc.	
Date 10/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hardin, Drew and Sherry Contributor address; City; State; Zip Code 10801 N Mopac Expy Bldg. 1, Ste. 120 Austin, TX 78759-5459	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Regional Director, VP			Employer (See Instructions) Lockwood, Andrews & Newnam, Inc.	
Date 10/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Heckler, Jeff Contributor address; City; State; Zip Code 111006 Sierra Verde Trail Austin, TX 78759	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Consulting			Employer (See Instructions) The Solutions Group	
Date 10/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hendler, Scott Contributor address; City; State; Zip Code 1300 Alta Vista Ave Austin, TX 78704-2515	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Attorney			Employer (See Instructions) Hendler Lyons Flores, PLLC	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 12/29 Report: 14/40	
2 FILER NAME Kitchen, Ann			3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 10/07/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hersh, Stuart 6 Contributor address; City; State; Zip Code 1307 Kinney Ave Apt 117 Austin, TX 78704-2279	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)	
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions) Consultant		10 Employer (See Instructions) Self-Employed Stuart Hersh		
Date 10/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hime, Milton Contributor address; City; State; Zip Code 611 W 15th St Austin, TX 78701-1513	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)	
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Studio 8 Architects, Inc.		
Date 10/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hochberg, Scott Contributor address; City; State; Zip Code 6000 Reims Rd Apt 2605 Houston, TX 77036-3052	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)	
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Software Developer		Employer (See Instructions) Self		
Date 09/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hossanna Harutunian, Anne Contributor address; City; State; Zip Code PO Box W Austin, TX 78713-8923	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)	
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Harutunian Engineers		
Date 10/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Howard, Robert Contributor address; City; State; Zip Code 2315 Westforest Dr Austin, TX 78704-5809	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)	
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Economic development consultant		Employer (See Instructions) Robert M, Howard, Inc.		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 14/29 Report: 16/40	
2 FILER NAME Kitchen, Ann		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 09/26/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jones, Buddy 6 Contributor address; City; State; Zip Code 823 Congress Ave Ste 900 Austin, TX 78701-2458	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions) Hillco Partners	
Date 10/07/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jones, George Contributor address; City; State; Zip Code 6102 Mountainclimb Dr Austin, TX 78731-3824	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Self	
Date 09/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Joseph, Bruch Contributor address; City; State; Zip Code 204 La Vista Austin, TX 78704	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kallerman, Dick Contributor address; City; State; Zip Code 2510 Cedarview Dr Austin, TX 78704-3802	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Transportation Issue Coordinator		Employer (See Instructions) Sierra Club	
Date 10/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kebede, Denberwa Contributor address; City; State; Zip Code 17205 Tobermory Dr Pflugerville, TX 78660-1726	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Data Entry		Employer (See Instructions) DPS	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 15/29 Report: 17/40	
2 FILER NAME Kitchen, Ann		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 10/24/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Keil, Philip 6 Contributor address; City; State; Zip Code 912 Christopher St Austin, TX 78704-1620	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) architect		10 Employer (See Instructions) Furman + Keil Architects	
Date 10/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kim, Jennifer Contributor address; City; State; Zip Code 755 E Oltorf St Apt 201 Austin, TX 78704-5691	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Kaleidoscope Consultants LLC	
Date 10/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kosta, Elle Contributor address; City; State; Zip Code 800 Kavanagh Dr Austin TX Austin, TX 78748-6416	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Broker		Employer (See Instructions) Self	
Date 09/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kragas, Berit Contributor address; City; State; Zip Code 2631 Deerfoot Trl Austin, TX 78704-2764	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Employee		Employer (See Instructions) ARA	
Date 10/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Krentzel, Elise Contributor address; City; State; Zip Code 1330 Shore District Dr Apt 2340 Austin, TX 78741-1334	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 16/29 Report: 18/40	
2 FILER NAME Kitchen, Ann		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 10/22/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kuhn, Michael 6 Contributor address; City; State; Zip Code 2308 Spring Creek Dr Austin, TX 78704-2036	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Founder		10 Employer (See Instructions) ImagineSolar	
Date 10/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lane, Connie Contributor address; City; State; Zip Code 2305 Fair Oaks Dr Austin, TX 78745-2753	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Linn, Emma L. Contributor address; City; State; Zip Code TX	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) St. Edwards University	
Date 09/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) London, Jack Contributor address; City; State; Zip Code 101 Ridgemont Ct West Lake Hills, TX 78746-5498	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self	
Date 10/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lynch, Mike Contributor address; City; State; Zip Code 1800 Kinney Ave Austin, TX 78704-3322	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Schwegman, Lundberg and Woessner	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 17/29 Report: 19/40	
2 FILER NAME Kitchen, Ann		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 10/24/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mangan, Andrew 6 Contributor address; City; State; Zip Code 1600 Barton Springs Rd Austin, TX 78704-1081	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Marston, Jim Contributor address; City; State; Zip Code 2810 Townes Ln Austin, TX 78703-1645	Amount of contribution (\$) \$75.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Regional Director		Employer (See Instructions) EDF	
Date 10/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martinich, Leslie Contributor address; City; State; Zip Code 1114 Wild Basin Ledge Austin, TX 78746	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) trainer		Employer (See Instructions) self	
Date 10/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McCabe, John Contributor address; City; State; Zip Code 11805 Johnny Weismuller Ln Austin, TX 78748-2959	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McIver, Diana Contributor address; City; State; Zip Code 4101 Parkstone Hts Ste 310 Austin, TX 78746-7485	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Real Estate Developer		Employer (See Instructions) Diana McIver & Associates, Inc.	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 19/29 Report: 21/40	
2 FILER NAME Kitchen, Ann		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 10/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mesfin Ejigu, Daniel 6 Contributor address; City; State; Zip Code 1522 Thibodeaux Dr Round Rock, TX 78664-7209	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Employee		10 Employer (See Instructions) TCEQ	
Date 10/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Miller, Diane Contributor address; City; State; Zip Code 7605 Clydesdale Dr Austin, TX 78745-6706	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Civic Collaboration	
Date 10/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Miller, Kathy Contributor address; City; State; Zip Code 12812 Poquoson Dr Austin, TX 78727-2863	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Texas Freedom Network	
Date 10/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mintz, David Contributor address; City; State; Zip Code 2705 Northland Dr Austin, TX 78756-1021	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moffat, Susan Contributor address; City; State; Zip Code 4112 Speedway Austin, TX 78751	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 20/29 Report: 22/40	
2 FILER NAME Kitchen, Ann		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 10/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mullins, Charles 6 Contributor address; City; State; Zip Code 4203 Farhills Dr Austin, TX 78731-2813	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) retired		10 Employer (See Instructions) retired	
Date 10/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nation, Beverly Contributor address; City; State; Zip Code 3120 Above Stratford Pl Austin, TX 78746-4600	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Neavel, Nancy Contributor address; City; State; Zip Code 2905 Scenic Dr Austin, TX 78703-1042	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/07/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Needham, Terri Contributor address; City; State; Zip Code 12521 Belcara Pl Austin, TX 78732-2363	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Operations Manager		Employer (See Instructions) P.S. Landscapes, Inc.	
Date 09/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Neely, Mary Ann Contributor address; City; State; Zip Code 1908 Barton Pkwy Austin, TX 78704-3212	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 21/29 Report: 23/40	
2 FILER NAME Kitchen, Ann		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 10/17/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Newberger, David 6 Contributor address; City; State; Zip Code 2905 San Gabriel St Ste 218 Austin, TX 78705-3541	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Founder		10 Employer (See Instructions) Azuma Leasing	
Date 10/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Patterson, Grania Contributor address; City; State; Zip Code 6704 Manchaca Rd Unit 26 Austin, TX 78745-4980	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired	
Date 10/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Richards, Clark Contributor address; City; State; Zip Code 2104 Wright St Austin, TX 78704-2834	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Richards Rodriguez & Skeith	
Date 10/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodriguez, Frank Contributor address; City; State; Zip Code PO Box 1271 Austin, TX 78767-1271	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Latino HealthCare Forum	
Date 10/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rogers, Fred and Marian Contributor address; City; State; Zip Code 10618 Legends Ln Austin, TX 78747-1238	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 22/29 Report: 24/40	
2 FILER NAME Kitchen, Ann		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 10/24/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rogoff, Regina 6 Contributor address; City; State; Zip Code 1705 Schieffer Ave Austin, TX 78722-1227	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 10/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Roth, Danny Contributor address; City; State; Zip Code 1503 Wild Cat Holw West Lake Hills, TX 78746-3640	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Real estate		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Southwest Strategies Group			
Date 10/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rutishauser, Robert Contributor address; City; State; Zip Code 4200 Jackson Ave Apt 5015 Austin, TX 78731-6061	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) retired		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) none			
Date 10/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ryan, Mark Contributor address; City; State; Zip Code 1900 Little Elm Trl Apt 7 Cedar Park, TX 78613-2807	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 09/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Saiter, Cynthia Contributor address; City; State; Zip Code 600 Congress Ave Fl 15 Austin, TX 78701-3238	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Scott, Douglas & McConnico, LLP			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 23/29 Report: 25/40	
2 FILER NAME Kitchen, Ann		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 10/06/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sarosdy, Jane 6 Contributor address; City; State; Zip Code 13505 Lamplight Village Ave Austin, TX 78727-1509	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Director		10 Employer (See Instructions) State of Texas	
Date 10/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schenkkan, Pete Contributor address; City; State; Zip Code 117 Laurel Ln Austin, TX 78705-2813	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Graves Dougherty Hearon & Moody	
Date 10/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Seifu, Yemane Contributor address; City; State; Zip Code 1015 E Yager Ln Unit 92 Austin, TX 78753-7007	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired	
Date 09/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sifuentes, Marina Contributor address; City; State; Zip Code 2510 Camino Alto Austin, TX 78746-2408	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Brookside Women's Medical Center	
Date 10/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Siyum and Yosief, Ababa and Eyeyu Contributor address; City; State; Zip Code 13608 Merseyside Dr Pflugerville, TX 78660-8870	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Driver		Employer (See Instructions) Lone Star Cab	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 24/29 Report: 26/40	
2 FILER NAME Kitchen, Ann		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 09/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Beverly 6 Contributor address; City; State; Zip Code 200 Congress Ave Unit 16B Austin, TX 78701-4535	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) VP		10 Employer (See Instructions) Maximus	
Date 10/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Daniel Contributor address; City; State; Zip Code 6807 Hardy Dr Apt 4 Austin, TX 78757-2499	Amount of contribution (\$) \$10.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Wendy Contributor address; City; State; Zip Code 1512 Bluebonnet Ln Austin, TX 78704-2854	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Spontak, Dede Contributor address; City; State; Zip Code 2103 Bluebonnet Ln Austin, TX 78704-4022	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Architerra	
Date 10/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Steeg, Susan Contributor address; City; State; Zip Code 8702 El Rey Blvd Austin, TX 78737-1327	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Travis County	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 25/29 Report: 27/40	
2 FILER NAME Kitchen, Ann		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 10/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Su, Yu-Chun 6 Contributor address; City; State; Zip Code 1131 Lexington Green Dr Missouri City, TX 77459-2843	7 Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) EWRE Technical Director		10 Employer (See Instructions) Lockwood, Andrews & Newnam, Inc.	
Date 10/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Swenson Auten, Roland and Roseana Contributor address; City; State; Zip Code 1507 Yaupon Valley Rd West Lake Hills, TX 78746-3400	Amount of contribution (\$) \$700.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Managing Director		Employer (See Instructions) SXSU	
Date 10/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Taniguchi, Evan Contributor address; City; State; Zip Code 2905 Pearl St Austin, TX 78705-3510	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Taniguchi Architects	
Date 10/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tekle and Kassa, Yodit and Solomon Contributor address; City; State; Zip Code 2958 Donnell Dr Round Rock, TX 78664-5709	Amount of contribution (\$) \$700.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) President/CEO		Employer (See Instructions) Lone Star Cab	
Date 10/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Texas Taxi PAC Contributor address; City; State; Zip Code 919 Congress Ave Ste 1500 Austin, TX 78701-2156	Amount of contribution (\$) \$350.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 26/29 Report: 28/40	
2 FILER NAME Kitchen, Ann		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 10/07/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tyler, Kathy 6 Contributor address; City; State; Zip Code 14217 Red Feather Trl Austin, TX 78734-2450	7 Amount of contribution (\$) \$40.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) farmworker housing		10 Employer (See Instructions) Motivation Education & Training, Inc.	
Date 10/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tyler, Kathy Contributor address; City; State; Zip Code 14217 Red Feather Trl Austin, TX 78734-2450	Amount of contribution (\$) \$40.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) farmworker housing		Employer (See Instructions) Motivation Education & Training, Inc.	
Date 10/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Varty, Helen Contributor address; City; State; Zip Code 3405 Santa Monica Dr Austin, TX 78741-7023	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) administrator		Employer (See Instructions) rbj	
Date 10/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Von Quintus, Linda Contributor address; City; State; Zip Code 2303 Lear Ln Austin, TX 78745-6044	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) AAA Texas		Employer (See Instructions) Vice President, Government and Community	
Date 10/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walker, Nancy Contributor address; City; State; Zip Code 5710 Abilene Trl Austin, TX 78749-2113	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Policy Advisor		Employer (See Instructions) State of Texas	

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SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 27/29 Report: 29/40	
2 FILER NAME Kitchen, Ann		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 10/12/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walters, J.W and S.C 6 Contributor address; City; State; Zip Code 11024 River Plantation Dr Austin, TX 78747-1486	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 10/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Watkins, Sharon Contributor address; City; State; Zip Code 4416 Ramsey Ave Austin, TX 78756-3209	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) service		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) zenith cafe corp			
Date 10/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Weed, Betty Contributor address; City; State; Zip Code 2218 Alta Vista Ave Austin, TX 78704-5227	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Research		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) TEA			
Date 10/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wendler, Ken Contributor address; City; State; Zip Code 4303 Canyonside Trl Austin, TX 78731-2858	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Consultant		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Self			
Date 10/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Whitehurst, Bill & Stephanie Contributor address; City; State; Zip Code 2703 Westlake Dr Austin, TX 78746-1909	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Whitehurst, Harkness, Brees, Cheng, Alsaffar			

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SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 28/29 Report: 30/40	
2 FILER NAME Kitchen, Ann		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 09/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wiederspahn, Sue 6 Contributor address; City; State; Zip Code 1914 Patton Ln Austin, TX 78723-1236	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Bio Tech		10 Employer (See Instructions) Seton	
Date 10/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wilcox Mardegian, Scott and Rachael Contributor address; City; State; Zip Code 501 Quarry Road Austin, TX 78703	Amount of contribution (\$) \$700.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Director of Technology		Employer (See Instructions) SXSU	
Date 10/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Williams, Chad Contributor address; City; State; Zip Code 7500 Greenhaven Dr Austin, TX 78757-1706	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Marketing Manager		Employer (See Instructions) IBM	
Date 10/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wisdom, Barbara Contributor address; City; State; Zip Code 2217 Marcus Abrams Blvd Austin, TX 78748-4010	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wong Mok, Amy Contributor address; City; State; Zip Code 6301 Cat Mountain Cv Austin, TX 78731-3502	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) administrator		Employer (See Instructions) Asian American Cultural Center	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 29/29 Report: 31/40

2 FILER NAME Kitchen, Ann

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date **5** Full name of contributor out-of-state PAC (ID# _____)
10/25/2014 Wood, Marge

7 Amount of contribution (\$) **8** In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
2303 Comburg Castle Way
Austin, TX 78748-5215

\$10.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
10/16/2014 Yedeme and Woldegebriel, Tigabue and Meseret

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
405 Tom Kite Dr
Round Rock, TX 78664-3984

\$500.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Driver

Employer (See Instructions)
Lone Star Cabs

Date Full name of contributor out-of-state PAC (ID# _____)
10/24/2014 Zamora Garcia, Blanca

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
1715 S 1st St
Austin, TX 78704-4249

\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/9 Report: 32/40	2 FILER NAME Kitchen, Ann	3 ACCOUNT # (TEC filers) 0000001
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4 Date 10/01/2014	5 Payee name ADP, INC.
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6 Amount (\$) \$782.25	7 Payee address City; State; Zip Code One ADP Drive MS-100 Augusta, GA 30909
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Employer Taxes <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/10/2014	Payee name ADP, INC.
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Amount (\$) \$73.55	Payee address City; State; Zip Code One ADP Drive MS-100 Augusta, GA 30909
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Payroll Fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/09/2014	Payee name AT&T
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Amount (\$) \$72.93	Payee address City; State; Zip Code PO Box 537104 Atlanta, GA 30353-7104
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> campaign phone <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 09/30/2014	Payee name Austin Area AFL-CIO
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Amount (\$) \$310.00	Payee address City; State; Zip Code P.O. Box 87 Austin, TX 78767
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Advertisement <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/9 Report: 33/40		2 FILER NAME Kitchen, Ann		3 ACCOUNT # (TEC filers) 0000001	
4 Date 10/17/2014		5 Payee name CheckMark Typesetting			
6 Amount (\$) \$4,120.34		7 Payee address City; State; Zip Code 3217 N IH 35 Austin, TX 78722			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Yard Signs <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/01/2014		Payee name Fine, Kristin			
Amount (\$) \$4,500.00		Payee address City; State; Zip Code 2404 Burly Oak Drive Austin, TX 78745			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/03/2014		Payee name Fine, Kristin			
Amount (\$) \$300.00		Payee address City; State; Zip Code 2404 Burly Oak Drive Austin, TX 78745			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Healthcare <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/06/2014		Payee name GNI Consulting, LLC			
Amount (\$) \$2,000.00		Payee address City; State; Zip Code P.O. Box 685008 Austin, TX 78768			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> General Consulting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/9 Report: 34/40	2 FILER NAME Kitchen, Ann	3 ACCOUNT # (TEC filers) 0000001
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4 Date 09/27/2014	5 Payee name Hardwick, Andrew
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6 Amount (\$) \$2,000.00	7 Payee address City; State; Zip Code 2804 Rio Grande APT 203 Austin, TX 78705
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/01/2014	Payee name Hardwick, Andrew
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Amount (\$) \$2,000.00	Payee address City; State; Zip Code 2804 Rio Grande APT 203 Austin, TX 78705
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/15/2014	Payee name InFocus Campaigns, LLC
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Amount (\$) \$1,242.76	Payee address City; State; Zip Code PO Box 10726 Fort Worth, TX 76114
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> calls <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/23/2014	Payee name La Voz
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Amount (\$) \$375.00	Payee address City; State; Zip Code 1011 Springdale Rd Austin, TX 78721
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Advertisement <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/9 Report: 35/40		2 FILER NAME Kitchen, Ann		3 ACCOUNT # (TEC filers) 00000001	
4 Date 10/21/2014		5 Payee name Office Depot			
6 Amount (\$) \$32.44		7 Payee address City: State; Zip Code 2101 S Lamar Austin, TX 78704			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> office supplies <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/22/2014		Payee name Office Depot			
Amount (\$) \$175.70		Payee address City: State; Zip Code 2101 S Lamar Austin, TX 78704			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> office supplies <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/22/2014		Payee name Office Depot			
Amount (\$) \$42.22		Payee address City: State; Zip Code 2101 S Lamar Austin, TX 78704			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> supplies <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/22/2014		Payee name Office Depot			
Amount (\$) \$637.00		Payee address City: State; Zip Code 2101 S Lamar Austin, TX 78704			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> office supplies <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/9 Report: 36/40		2 FILER NAME Kitchen, Ann		3 ACCOUNT # (TEC filers) 00000001	
4 Date 10/23/2014		5 Payee name Office Depot			
6 Amount (\$) \$833.00		7 Payee address City; State; Zip Code 2101 S Lamar Austin, TX 78704			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> supplies <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/23/2014		Payee name Office Depot			
Amount (\$) \$27.44		Payee address City; State; Zip Code 2101 S Lamar Austin, TX 78704			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> supplies <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/24/2014		Payee name Office Depot			
Amount (\$) \$121.46		Payee address City; State; Zip Code 2101 S Lamar Austin, TX 78704			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> supplies <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/24/2014		Payee name Office Depot			
Amount (\$) \$9.74		Payee address City; State; Zip Code 2101 S Lamar Austin, TX 78704			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> office supplies <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 6/9 Report: 37/40		2 FILER NAME Kitchen, Ann		3 ACCOUNT # (TEC filers) 0000001	
4 Date 10/24/2014		5 Payee name Office Depot			
6 Amount (\$) \$161.02		7 Payee address City; State; Zip Code 2101 S Lamar Austin, TX 78704			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> office supplies <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/15/2014		Payee name Rindy & Associates, Inc.			
Amount (\$) \$21,270.00		Payee address City; State; Zip Code 2401 East 6th Street #1007 Austin, TX 78702			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mailer <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/23/2014		Payee name Rindy & Associates, Inc.			
Amount (\$) \$10,000.00		Payee address City; State; Zip Code 2401 East 6th Street #1007 Austin, TX 78702			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> printing <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/20/2014		Payee name Roberson, Grace			
Amount (\$) \$445.00		Payee address City; State; Zip Code 4404 E Oltorf St APT 16303 Austin, TX 78741			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Wages <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 7/9 Report: 38/40		2 FILER NAME Kitchen, Ann		3 ACCOUNT # (TEC filers) 00000001	
4 Date 10/02/2014		5 Payee name Sage Payment Solutions			
6 Amount (\$) \$668.33		7 Payee address City; State; Zip Code 1750 Old Meadow Road #300 Mclean, VA 22102			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit Card Fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/20/2014		Payee name Steger, MacKenzie			
Amount (\$) \$736.00		Payee address City; State; Zip Code 350 North Street #1405A San Marcos, TX 78666			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Wages <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/06/2014		Payee name USPS			
Amount (\$) \$49.00		Payee address City; State; Zip Code 7310 Manchaca RD Austin, TX 78745			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Stamps <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/06/2014		Payee name USPS			
Amount (\$) \$49.00		Payee address City; State; Zip Code 7310 Manchaca RD Austin, TX 78745			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> stamps <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 8/9 Report: 39/40		2 FILER NAME Kitchen, Ann		3 ACCOUNT # (TEC filers) 00000001	
4 Date 10/06/2014		5 Payee name USPS			
6 Amount (\$) \$49.99		7 Payee address City; State; Zip Code 7310 Manchaca RD Austin, TX 78745			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> stamps <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/20/2014		Payee name USPS			
Amount (\$) \$49.00		Payee address City; State; Zip Code 7310 Manchaca RD Austin, TX 78745			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Stamps <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/20/2014		Payee name USPS			
Amount (\$) \$49.00		Payee address City; State; Zip Code 7310 Manchaca RD Austin, TX 78745			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Stamps <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/21/2014		Payee name USPS			
Amount (\$) \$49.00		Payee address City; State; Zip Code 7310 Manchaca RD Austin, TX 78745			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Stamps <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 9/9 Report: 40/40	2 FILER NAME Kitchen, Ann	3 ACCOUNT # (TEC filers) 00000001
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4 Date 10/20/2014	5 Payee name West Gate Lanes
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6 Amount (\$) \$30.00	7 Payee address City; State; Zip Code 2701 W William Cannon Dr Austin, TX 78745
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/20/2014	Payee name West Gate Lanes
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Amount (\$) \$195.00	Payee address City; State; Zip Code 2701 W William Cannon Dr Austin, TX 78745
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/20/2014	Payee name West Gate Lanes
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Amount (\$) \$30.00	Payee address City; State; Zip Code 2701 W William Cannon Dr Austin, TX 78745
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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BUNDLING REPORT

Name of candidate/officeholder: Ann Kitchen

1. For each person/bundler who has solicited and obtained campaign contributions on your behalf of \$200 or more per person from five (5) or more individuals during the reporting period, provide the following information. (This requirement does not apply to an individual who raises funds in total amount of \$5,000 or less for a candidate through a fundraising event held at the individual's residence.)

Name of Individual/Bundler	Address	Occupation	Employer	Total Amount Bundled
Solomon Kassa	2958 Donnell Drive Round Rock, TX 78664	CEO/President	Lone Star Cab	\$4,000

2. For each person identified above, enter the name and address of each individual contributor whose contribution was bundled by that individual. Attach additional sheets if necessary.

Name of Contributor	Address	Occupation	Employer	Contribution Amount	Bundler
See attached					

3. Identify each person registered or required to be register under City Code, Chapter 4-8 (Regulation of Lobbyists) employed by, or compensated to lobby by: (1) any Bundler identified in Section 1 above, (2) a business association through which the Bundler does business, or (3) the Bundler's employer.

*Note: It is important to remember that contributions to you are from the **actual donor, not** from the individual who solicited the donations on your behalf. Therefore, on form C/OH you must identify the actual donor as the contributor.*

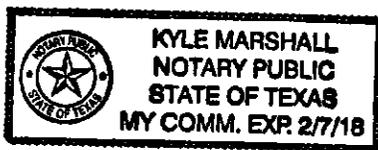
**STATE OF TEXAS
VERIFICATION**

I certify that the total amount bundled on my behalf in the campaign period by all partners, shareholders, principals, employees, and persons who conduct business through a business association that is subject to City Code, Section 2-2-22(E), when added together, does not exceed ten (10) times the contribution limit set by City Charter, Article III, Section 8(A)(1) for the entire business association.



Signature of Affiant

Kyle Marshall 10-27-12



Name of Contributor	Address	Occupation	Employer	Contribution Amount	Bundler
Eyeyu Yosief and Ababa Siyum	13608 Mereyside Drive, Pflugerville, TX 78660	Driver	Lone Star Cab	\$500	Solomon Kassa
Tigabu Yedeme and Meserete Woldegebriel	405 Tom Kite Drive, Round Rock, TX 78664	Driver	Lone Star Cab	\$500	Solomon Kassa
Zenaw Mersha	9001 Briardale Dr Austin, TX 78758	Driver	Lone Star Cab	\$250	Solomon Kassa
Abreha Mersha and Workey Abreha	9001 Briardale Drive, Austin, TX 78753	Driver	Lone Star Cab	\$500	Solomon Kassa
Daniel Ejigu and Gennet Melese	1522 Thiboxeaux Dr, Round Rock, TX 78664	Employee	TCEQ	\$250	Solomon Kassa
Firew Getahun and Mirut Mailu	2722 High Point Drive, Round Rock, TX 78664	Accountant	Financial Freedom	\$450	Solomon Kassa
Demberwa Kebede	17205 Tobermory Dr Pflugerville, TX 78660	Data Entry	DPS	\$300	Solomon Kassa
Tsegerle Chemet	1915 Wells Branch Pkwy #1614 Austin	Driver	Lone Star Cab	\$250	Solomon Kassa
Yemene Seifu	1015 E Yager Ln Austin, TX 78753	Retired	Retired	\$300	Solomon Kassa
Solomon Khassa and Yodit Tekle	2958 Donnell Drive Round Rock, TX 78664	President/CEO	Lone Star Cab	\$700	Solomon Kassa